**PATENT** 

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MAR 1	1 2002 필	IN THE UNITED STATES PATENT AND T	
ek.	In <b>9</b> e Patent	Application of )	COPY OF PAPERS ORIGINALLY FILED
TRAD	Inventor:	BECKI SPEAKMAN )	Group Art: 1756 ————————————————————————————————————
	Serial No.:	09/549,445	Examiner: Mohamedulla
	Filed:	April 14, 2000	
	Title:	MASKING APPARATUS AND METHOD )	
	·		

#### **CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8**

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Box Non-Fee Amendment **Assistant Commissioner for Patents** Washington, D.C. 20231

Atty. Docket: 70015060.0002

## AMENDMENT TRANSMITTAL

Ms. Mohamedulla:

PECEIVED
TO 1700 Transmitted herewith is an amendment to the above-identified patent application.

No additional fee is required. <u>X</u>

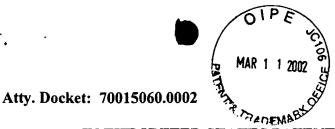
The fee has been calculated as shown below.

; CLAIMS AS AMENDED							
. (1)	(2)	(3)	(4)	" <del>§" (</del> 5)	(6) <sup>34</sup>	(7)	
	CLAIMS	at kita sa najita sa	HIGHEST	PRESENT	RATE	ADDIT	IONAL
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CLAIMS					1. S.A. (1. 18.1)		
INDEP.	3	MINUS *	**3	=0	x \$84.00×	COPY OF	PAPERO
CLAIMS						PRIGINAL	LY FILED
MULTIPLE DEPENDENT CLAIMS FEE (if applicable and not yet paid) + \$280.00.							
EXTENSION FEE:							
1 month = \$110 2 months = \$400							
3 months = \$920 4 months = \$1,440							İ
SUBTOTAL ADDITIONAL FEE						0	
Small Entity (50% of subtotal filing fee if checked)					(	)	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$0	

Please charge my Deposit Account No.	19-3140 in the amount of \$					
X The Commissioner is hereby authorized to charge any additional fees which may be required, including, if necessary, the filing fee if the above-referenced check is in the wrong amount, unsigned, postdated, or otherwise improper or informal or missing, or credit any overpayment to my Deposit Account No. 19-3140. A duplicate copy of this sheet is enclosed.						
A check in the amount of \$	to cover the filing fee is enclosed.					
	Respectfully submitted,					
Date: $\frac{2/37/63}{}$	Jennifer H. Hammond, Reg. No. 41,814  SONNENSCHEIN NATH & ROSENTHAL P.O. Box #061080  Wacker Drive Station Sears Tower Chicago, IL 60606-1080 Tel. No. (415) 882-5000 Fax. No. (415) 543-5472					

<sup>\*</sup> If number is less than 20, write "20".

\*\*If number is less than 3, write "3".



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**PATENT** 

# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of		)	Crosse Art. 1756	
Inventor:	BECKI SPEAKMAN	) )	Group Art: 1756  Examiner: Mohamedulla	COPY OF PAPERS ORIGINALLY FILED
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Jame: HOLLY B. HANNA

Date of Signature and Mailing

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TC 12002

Box Non-Fee Amendment Assistant Commissioner for Patents Washington, D.C. 20231

**AMENDMENT** 

Ms. Mohamedulla:

In response to the Office Action mailed November 29, 2001, setting a response period ending on February 28, 2002, Applicant responds as follows:

### **REMARKS**

Claims 1-9 were elected for prosecution by way of a Restriction Requirement. Claim 10 is being held in abeyance.